

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571) 273-2885**

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance order, and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

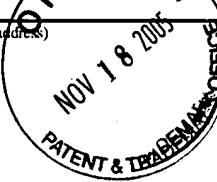
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

39207 7590 11/02/2005

**SACCO & ASSOCIATES, PA
P.O. BOX 30999
PALM BEACH GARDENS, FL 33420-0999**

11/21/2005 GWDRDGF2 00000052 10614626

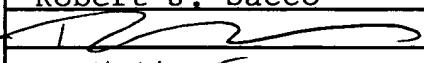
01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP
03 FC:8001 9.00 OP



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Robert J. Sacco	(Depositor's name)
	(Signature)
11-16-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

10/614,626 07/07/2003 Michael S. Zarro 7162-98 7838

TITLE OF INVENTION: MULTI-BAND HORN ANTENNA USING FREQUENCY SELECTIVE SURFACES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional NO \$1400 \$300 \$1700 02/02/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

HO, TAN 2821 343-756000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list **Sacco & Associates, PA**

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

HARRIS CORPORATION

MELBOURNE, FL

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 3

A check in the amount of the fee(s) is enclosed.

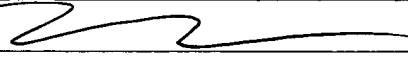
Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2884 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 

Date 11-16-05

Typed or printed name Robert J. Sacco

Registration No. 35,667

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/614,626 Confirmation No. : 7838
Applicant : ZARRO
Filed : July 7, 2003
TC/A.U. : 2821
Examiner : HO, Tan

Docket : 7162-0098
Customer No. : 39207

TRANSMITTAL LETTER

Mail Stop Issue Fee
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please find attached for filing:

- ✓ PTOL85 Fee Transmittal
- ✓ Fee - \$1709
- ✓ Other: Postcard Receipt
- ✓ Please charge any deficiencies or credit any overpayments to Deposit Acct. No. 50-2884.

Respectfully submitted,

11-16-05
Date

Robert J. Sacco
Registration No. 35,667
SACCO & ASSOCIATES, P.A.
P.O. Box 30999
Palm Beach Gardens, FL 33420-0999
Tel: 561-626-2222

Certificate Under 37 C.F.R. 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 11-16-05. Typed name of person signing this certificate: ROBERT J. SACCO

